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TROPHIC SURGERY

In the Treatment of Chronic Diseases

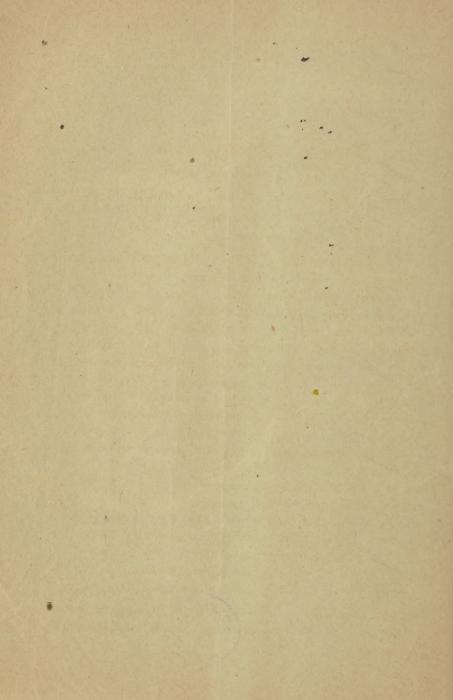
AN ESSAY

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TROPHIC SURGERY

By J. C. Anderson, M. D.

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Qui non proficit, deficit.

Gentlemen: About two years ago I began treating consumption and other chronic diseases by means of destroying the *trophic lesions*. Having spent years in practice with the ordinary conventional methods, I confess I entered but half-hearted into the new field that had been represented as possessing such grand possibilities. However, as the good results from time to time became manifest, I was soon awakened into an earnest, zealous devotion to its principles. Chronic cases that had baffled my best efforts for months and years, were again untertaken with renewed hopes, and I am pleased to say with the happiest results.

Before proceeding futher with the subject we may state that trophic surgery may be defined as the art of treating trophic lesions by surgical measures, and trophic lesions are explained as certain pathelogical morbid changes or malformations that directly or indirectly obstruct or cut off from certain parts of the body, the customary neutrative elements. The lesions referred to in this paper are situated in the lower part of the bowel called the rectum, including the sigmord flexure.

These lesions originate principally through two causes, viz:

First. Cicatrical bands produced by the healing proces of cankerous ulcers that progress in a circular sweeping track



until they encompass the entire calaber of the bowel, leaving a contracted and strictured condition of the part affected.

Second. By indurated and hypurtrophied folds and valves at and just below the sigmoid flexure.

These several lesions with the resultant sequela, such as exagerated papilla, tumors, infiltrated degenerations which have eventuated into abscesses or cystic pockets, the contents of which have become aglutinated and solidified. Any of the above mal-conditions, either singly or combined, may exert pressure or strangulation of the spinal plexus of nerves, the humorrhoidel vessels and lacteal ducts; cutting off respectively nervous energy, neutrative elements to the upper part of the body, interrupting the general portal circulation, and preventing the free elimination of waste material from the system.

Any of the foregoing conditions exert an influence more or less in impairing the vital functions and lead to disease. But in my observations the characteristic *cicatricial bauds*, so common in most chronic ailments, are the principal factors of disturbance, which grasp and hold the nerves, vessels and lacteal ducts as in a vise.

As a consequence we have a train of morbid phenomena the enevitable sequence of *mechanical* causation, viz, congestion, hyperemia inanetion, etc., all of which being so purely local in their inception, it is plain to observe that no amount of *medicine*, *drugs*, *massage*, *gymnastics*, or, if you please, *isims* and *pathies* can be of any service in the effort to cure. Allowed to progress for a given time more serious constitutional disturbances become manifest. Inflamation and general blood poisoning will develop *bronchitis*, *catarrh*, *consumption*, *dyspepsia*, *Bright's disease of kidneys*, *mental abrasions*, *nervous prostration*, *rheumatism*, and we might add the whole catalogue of chronic diseases afficting humanity.

This is no fanciful drawn picture, but a plain, practical, every day reality. One of the peculial deceptive and characteristic features of these lesions, and one that tends very greatly to merge it in obscurity, leading both patient and physician astray, is that there is total absence of pain in the immediate vicinity of the lesions. Like the traumatism of wounds, the pain and suffering are in quite a different part of the body.

If, therefore, it be a fact that most chronic diseases owe their origin to these lesions, then it is also not strange that medicine and the interminal dosing of the stomach has proven so very unsatisfactory.

Hence the radical removal of these lesions which is now safely accomplished in but a few seconds of time, without suffering to the patient, by means of this newly devised electrical instrument, means the speedy return of health to these poor sufferers, and a beconing light that the weary stormtossed practicioner will hail with satisfaction.

Let me ask a few questions:

May we reasonably expect a normal degree of health with an impeded, obstructed circulation of the blood?

Can we have proper animation and vitality with the principle avenues of neutrition strangled as though bound by a cord?

Will the rudy glow of health be manifest in an individual with whom the poisoned efete matter is retained and pent up in the system?

This being true, how then can medicine, drugs, dietetics, or, in fact, any or all of the inumerable thereoputic measures avail anything with the exciting cause unremoved?

Why persevere in doing patch-work when radical measures are needed?

The folly of such procedure is well illustrated every day by the many credulous invalids, who stray from one doctor to another, swallowing all kinds of mixtures from the simple expectorant to the more protentious pypophosphites, with the vain delusion that in some of them they may find that which will relieve them of the dread malady that is daily sapping their vital forces.

To this class of sufferers Trophic Surgery will prove a God-send, and to the doctor also, who is sufficiently skilled to handle it properly. Through its ministrations the sluggish life-stream is made to spring at once to its duty, cold parts become hot, hot ones become cool, equlibrum is again secured and the floundering life-boat is once more steadied in its course.

The damage from long standing lesions may be very extensive, and, if so, time may be necessary to complete the work of repair, but there will be *immediate evidence* of renewed activity, and progress towards health will be continually perceptible.

It starts the blood current at once; it arouses the entire system to immediate activity, wakes it up, renders it vigorous and keenly responsive. If you speak to it now by well directed measures it will answer back. In other words, we have now a grand basis for what ever work it may be necessary to inaugurate.

General re-awakening of the whole system takes place; the obstructions having been removed, the general circulation takes on renewed activity, muscular tissues wasted for want of active cell formation are again supplied, nervous tissues are once more feasted with the long coveted element necessary to their support, the heart becomes imbued with renewed buoyancy, and again sends the life-current into the deserted avenues of enfeebled organs. The organs of assimilation and digestion are relieved of that depressing stasis arising from dyspeptic diseases, the liver is freed from its sluggish portal engorgement, the alimentary system opens her flood-gates to the exit

of pent up poison, the lungs open their chambers to the ventilating influence of pure oxygen, the brain is freed from depressing lethargy, and the inspiring prospect of health again dawns upon the patient.

During twenty years of active battling against chronic maladies in which we were frequently compelled, with battered shield and our best efforts, to surrender to the stern, domineering dictates of obstinate disease; but in the past two years, supplied with new equipments and a new mode of attack, we have achieved a succession of victories that imbues us with new hopes, renewed interest, and a more earnest zeal for the work of our profession.

In order to illustrate the superior results of this treatment I append the following cases, principally all of which were such as to have resisted all other treatment. For the sake of brevity I omit giving symptoms and simply submit the facts in as concise a manner as possible:

Case I.—Farmer; age, 30 years; weight, when in health, 155 pounds; at beginning of treatment 110 pounds; has been ill and in decline for the past eighteen months with what is pronounced organic heart disease; his father had died of similar disease twelve years ago. I destroyed the lesions April 8, 1886; in 30 days he gained 20 pounds; in 90 days had regained his normal weight and health, and remains well at present.

Case II.—Married man; aged 28; school teacher; former weight, when in health, 160 pounds; now weighs 115 pounds; has what is thought to be heriditary consumption, as several of his near relatives had died of that disease; he had the usual symptoms; emaciation, cough, with profuse expectoration, night sweats, pulse 100, etc. Gave treatment June 2, 1886; in 30 days had gained 30 pounds; in 90 days reports himself perfectly well; weight above normal and health remains good.

Case III.—Married man; age, 24 years; printer; father, two sisters and a brother died of consumption; was supposed to be going rapidly with same disease; has lost 40 pounds in last four months and is scarcely able to set up; has all the symptoms of an advanced case of consumption. Operated September 10, 1887; has regained his normal weight! reports himself cured and making full time at his trade.

Case IV.—Mr. C.; single: age, 27; eight years ago had typhoid feve; since then has gone into general decline and nervous prostration; weight reduced 50 pounds. Operated, May 18, 1886; in three months had gained his normal weight and has remained in the most perfect health since.

Case V.—Mr. N.; age, 50; married; veteran soldier; since army service has had chronic diarrhoæ and piles in most aggravated form; normal weight 135 pounds; is now reduced to 98 pounds; a mere skeleton. Operated September 12; in three weeks gained 17 pounds, when he went West, but writes me that there is a steady improvement and gain.

Case VI.—Mrs. M.; married lady; age, 35; of scrofulous family; an older sister having died of consumptiou; is emaciated and very much lame and deformed with rheumatism. Operated January 16, 1887; in six months recovered normal weight and nearly well.

Case VII.—Mrs. B.; aged, 50; married; mental abrasion; friends think it necessary to place her in asylum for insane. Operated September 1, 1887; at present writing seems perfectly well.

Case VIII.—Little girl; age, 10; has been treated for catarrh and constipation for two years; sleeps with such difficulty that her parents keep constant watch over her at night for fear she may suffocate from the difficult breating. Operated

November 2, 1887; in two weeks is entirely relieved of both the hard breathing and constipation, and parents think her catarrh now cured.

Case IX.—Mr. B.; age, 55; has been treated for some months for Bright's disease; examination of urine reveals large quantities of albumem. Operated November 1, 1886; in two months reported well; I have analyzed the urine several times since and find it perfectly normal; he still remains in good health up to present time.

Case X.—Married man; age, 40; has had itching piles for two years, and been treated by a number of physicians and specialists; for two months previous to calling upon me had been unable to secure but very little sleep. Operated July 4, 1886; reported himself cured on the 15th and has gained 28 pounds, and has remained free from the diease ever since.

Case XI.—Lady 36 years old; has been troubled since girlhood with severe attacks of sick headaches; coming on, for a few months past, as frequent as twice a week. Operated June 30, 1886; has been almost entirely exempt from them ever since.

Case XII.—Mrs. M.; age, 30; has suffered from dysmenorrhœa since 16 years old; each period was generally accompanied by severe tetonic spasms, which continued until her health was so impaired as to entirely unfit her for any household duties whatever; constipation, leuchorea, and female weakness was present in the most aggravated form; she had been treated by a number of physicians, both at home and abroad, without relief. On May 21, 1886, operated upon the trophic lesions and in two months she was perfectly cured and remains so since.

Case XIII.—Mrs. C.; age, 39; has been a sufferer for several years from vertigo, dyspepsia, palpitation of the heart,

sick headache, constipation, with frequent appearance of deep painful boils and herpetic eruption upon the skin. Gave her treatment August 9, 1886, and in 30 days reports herself free from all unpleasant symptoms, and has remained free from them all until the present time.

Case XIV.—Mr. H.; age, 55; has been afflicted with severe dizziness, catarrh and neuralgia in head, deafness, constipation and nervous prostration for four years past; after receiving treatment at home for two years went to Europe and was treated for several months without relief. On his return applied to me for treatment and was cured of all the troubles, deafness included, which had been pronounced entirely incurable.

It will be observed that in about all of the above cases that there was a very rapid increase in weight following the treatment, and it was this peculiar feature that attracted my attention in the early part of my experience in treating these lesions; which indicates how intimately they are related to the organs of digestion, neutrition and assimilation.

So universaly gratifying has been my success with the new method of treatment as compared with my former experince that I scarcely have the courage to undertake a chronic case now without first recommending the obliteration of these impeding obstacles.

The improvement immediately following a single treatment is frequently so manifestly marked in the patients general appearance as to at once attract the attention of friends and acquaintances, and has let me to conclude that these lesions stand as the great flood gates, daming back the sewerage upon the system, and hence their removal becomes an imperative sanitary measure in the physiological economy of health.

